
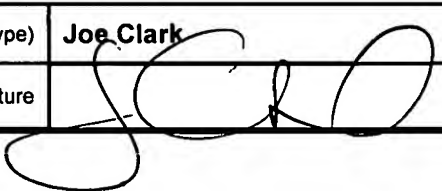
 <p>TRANSMITTAL FORM</p> <p><small>(Do not use for all correspondence after initial filing)</small></p>		Application Number		10/773,986					
		Filing Date		February 5, 2004					
		First Named Inventor		Jenny Louie-Helm					
		Art Unit		1618					
		Examiner Name		Blessing M. Fubara					
Mail Stop		AF		Attorney Docket Number		3100-0003.10			
ENCLOSURES (Check all that apply)									
<input type="checkbox"/> No fee due <input checked="" type="checkbox"/> Fee(s) due: \$1520.00 Fee Transmittal <input checked="" type="checkbox"/> Check enclosed <input type="checkbox"/> Charge Deposit Account No. 18-0580 <input type="checkbox"/> 37 CFR § 1.16 <input type="checkbox"/> 37 CFR § 1.17 <input checked="" type="checkbox"/> The Commissioner is authorized to charge any underpayment or credit any overpayment to Deposit Account No. 18-0580 <input checked="" type="checkbox"/> Return postcard <input type="checkbox"/> Amendment/Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) - ___ Affidavits/declaration(s)			<input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Information Disclosure Statement & PTO-Form 1449 <input type="checkbox"/> Copies of cited reference(s) <input type="checkbox"/> Response to Missing Parts / Incomplete Application <input type="checkbox"/> Declaration(s) by Inventor(s) <input type="checkbox"/> Preliminary Amendment <input type="checkbox"/> Updated Application Data Sheet <input type="checkbox"/> Drawing(s) - ___ Sheets <input type="checkbox"/> Compact Disk(s) - ___ CD(s) <input type="checkbox"/> Petition <input type="checkbox"/> Power of Attorney & Address Indication Form			<input type="checkbox"/> Revocation of & New Power of Attorney, Address Indication Form <input type="checkbox"/> Request for Refund <input type="checkbox"/> After Allowance Communication to a Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Notice of Appeal <input checked="" type="checkbox"/> Three-Month Extension of Time <input type="checkbox"/> Other Enclosure(s):			
REMARKS									
06/01/2007 HVUONG1 00000053 10773986 02 TC:1253 1020.00 OP									
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT									
Firm or Individual Name (print/type)		Isaac M. Rutenberg, Reg. No. 57,419 Mintz, Levin, Cohn, Ferris, Glovsky and Popeo, P.C.			Telephone		(650) 251-7700		
Signature					Date		May 29, 2007		
CERTIFICATE OF MAILING									
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.									
Name (print/type)		Joe Clark							
Signature						Date		May 29, 2007	